

## Positive Alternatives 2015 - 16 Quarterly Update

**Grantee:** Face to Face Health and Counseling Service, Inc.

**Contact:** Dana Hays; Hanna Getachew-Kreusser

**Contact Information:** 651-772-5563, [haysd@face2face.org](mailto:haysd@face2face.org) ; 651-772-5543, [getachew-kreusserh@face2face.org](mailto:getachew-kreusserh@face2face.org)

**Goal:** To support, encourage, and assist young women to complete their pregnancy, have healthy birth outcomes, appropriately care for their newborns, and increase their stability and self-sufficiency as parents.

**For the period:** January 1 – March 31, 2016

Activity or Service	Activity or Service Description Major Work Plan Activities	Work Plan Count	Program Progress and Accomplishments Report the progress and accomplishments made this period on each activity.	Report Count
<b>Administrative Activities</b>	Provide ongoing supervision and guidance of grant staff; ensure reporting and evaluation activities are completed		Prenatal case managers, nursing staff, and nurse practitioners meet on a weekly basis to discuss continuity of care, centering pregnancy, and best practices for prenatal clients. Case consultations occur for clients as needed. Grant budget meetings occur monthly.	
<b>Outreach</b>	Prepare and distribute wallet-sized cards describing Connect program		Women who have positive pregnancy tests at Face to Face are given information about prenatal care and Connect prenatal case management program. Connect cards are also distributed in the community through our Health Education Department at outreach events. One of our Connect case managers spends 4 hours a week at SafeZone (drop in center for homeless youth), providing pregnancy testing, outreach and education to young women, and connecting those needing prenatal care, and/or case management, to services at Face to Face.	

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<b>Case Management Services</b>	Provide case management support to prenatal clients; provide home visits for clients who have missed prenatal care visits	300	Our case management visits continue to exceed our quarterly goal. Included in this goal, we have made an increased effort to complete home visits with clients in their first two weeks postpartum.	356 Visits
<b>Provide Necessary Services Assessments to all clients</b>	Provide intake assessment to determine need. (New Clients)	45	Since January 2016, we have increased our prenatal case management to young women accessing services at Safe Zone (our drop-in center for youth). We are seeking to identify pregnant women, through offering pregnancy testing and outreach for those already pregnant, in order to enroll more women in the Connect program.	45 Clients
<b>Financial Assistance</b>	Provide assistance in completing applications for financial assistance;	120	Prenatal Case Managers offer assistance in completing applications for financial assistance and online insurance enrollment at the OB History appointment, or early in prenatal care. Most of our clients accept help in this process.	120 Times
<b>Mental Health</b>	Provide pre-natal and post-partum depression screening; provide referrals to non-PA funded Mental Health providers as needed	70	Goal: 60 Depression Screenings, 10 Referrals Actual: <b>87</b> Depression Screenings, <b>18</b> Referrals In our effort to continue providing our prenatal clients easy access to mental health through our warm referral process, we have seen our referrals increase. We continuously seek to reduce the stigma around receiving mental health care, and ensure our clients are educated about the importance of physical and mental health.	105 Times
<b>Nutrition</b>	Provide information on proper nutrition; provide referrals and follow- up; provide food bags, baby formula, and food gift cards as needed	45 – information 25 – food bags, etc.	We have exceeded our goal this quarter in providing nutrition information and emergency food resources for our pregnant and parenting clients. We continue to purchase emergency food bags on a monthly basis, in order to keep up with the demand from our clients.	72 Clients

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<b>Parenting Education</b>	Provide two parenting events per year including education on parenting-related topics	100/ year	We did not have a Parent Educational Event this quarter. In June we will be hosting our annual Summer event for families.	0 Qtr/ 28 Yr
<b>Pregnancy Education</b>	Provide pregnancy education within <b>Centering</b> Pregnancy® and prenatal education classes	60 Centering Visits 5 - additional	4 groups, 26 clients, 70 visits This quarter we have seen an increase in our Centering Pregnancy group attendance and have provided more moms pregnancy education in this group format. (see more in Comments section.)	70 Visits
<b>Pregnancy Testing</b>	Provide pregnancy testing 2 hours per week at SafeZone location	12	5 clients this quarter met with a Case Manager at Safezone and received pregnancy testing. However, since increasing hours at SafeZone, an additional 6 clients who were already pregnant, received necessary services intake and some case management (at the time of reporting) while accessing prenatal care in alternate clinics. (see more in Challenges section)	5 Clients
<b>Prenatal Medical Care</b>	Provide prenatal care visits in <b>Centering</b> Pregnancy (60 per quarter) integrating medical care with pregnancy education and support; provide individual prenatal care visits (240 per quarter)	60 – Centering Pregnacy  240 – individual prenatal visits	283 Visits with 89 Clients Though slightly under goal this quarter for our overall prenatal medical care visits, we are focused on the fact that we have exceeded our Centering Pregnancy care visits for this quarter. We are optimistic that these visits will continue to rise with increased enrollment in Centering Pregnancy.	283 Visits
<b>Provide Necessary Services Assessments Only</b>	Staff provides clients only intake assessments, information on, referral to and assistance with securing necessary services	1	Two clients this quarter received necessary-services intake only, before transferring care to alternate providers.	2
<b>Transportation</b>	Provide taxi rides or bus fare for clients to get to appointments.	60	Bus Tokens: 50 Cab Fare: 34 We assist and encourage clients to utilize their transportation assistance through their health insurance.	72 Times

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			However, many clients awaiting insurance enrollment are still in need of help getting to and from their clinic visits. In order to maintain budget goals, we attempt to provide cab rides to clinic visits and bus rides to get home.	

Maternal and Child Health Initiative Task Force Strategies				No.
Number of women who received car seats and car seat safety education from a PA funded program activity				n/a
Number of women who received car seat safety education only from a PA funded program activity				n/a
Number of women who received child abuse prevention education from a PA funded program activity				22
Number of women who received abusive head trauma (shaken baby) prevention education from a PA funded program activity				22
Number of women who received a baby bed, crib, or pack-n-play and sleep safety education from a PA funded program activity				n/a
Number of women who received sleep safety education only from a PA funded program activity				22

**Challenges:** This quarter we have increased prenatal case management time at SafeZone from 2 hours/week to 4 hours/week. As we have begun this process (6 identified SafeZone case management clients to date) we have identified the challenges of keeping regular contact with clients accessing a “drop-in” center. As these clients tend to be fairly transient, and many experiencing episodes of homelessness, it has been more difficult to connect on a regular basis to provide case management. As this program change is still in the new stages, we will make continued efforts to identify new strategies to meet the needs of these young women.

**Comments:** We are thrilled to report this quarter, that some of our efforts to increase Centering Pregnancy enrollment appear to be working. Our current groups are showing an increase in group size, and many women are regularly attending their group care sessions. We hope to see this trend continue. Next quarter we look forward to reporting on the Centering Pregnancy Basic and Advanced

Trainings that three of our staff members were able to attend in April 2016. These trainings brought renewed commitment to continue to follow the Centering Pregnancy model, along with a few new strategies to increase enrollment and patient satisfaction.